

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NUR		09-05-01
O.I.P.E. CLASSIFIER	(2)		9/1/01
FORMALITY REVIEW	RL	1080	10-4-01
RESPONSE FORMALITY REVIEW	att.	571	12/19/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date		
Final	01	05	12
Original	07	23	01
	03	03	03
1	✓	✓	✓
2	✓	✓	✓
3			
4			
5			
6	✓	✓	
7	✓	✓	
8	✓	✓	
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12	✓	✓	
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21	✓	✓	
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31	✓		
32	✓		
33	✓		
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35		✓	
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41	✓		
42	✓		
43	✓		
44	✓		
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Claim	Date		
Final	51		
Original	52		
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Claim	Date		
Final	101		
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If more than 150 claims or 10 actions
staple additional sheet here

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TM
10/18/01
12/19/01